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Und	er the Paperwork PATE	Reduction Act of ACT APPLIC	ATION	FEE DETER e for Form PTO	OITANIMS	RECORD		Application	Doeket Nur	392
	·	CLAIMS AS	FILED -	PARTI	umn 2)	: SMALL E	:NTITY	OR	OTHER SMALL	
	FOR	(Colu	R FILED		R EXTRA	RATE	FEE		RATE	FEE
BASIC	FEE	1100000	KIICCO				.325	OR		<u>:790.4</u>
TOTA	FR 1.16(a)) L CLAMS		minus 20			x 25=		OR	x 5 0=	·
INDE	FR 1.16(c)) PENDENT CLAIM FR 1.16(b))	is .	minus 3			x:/00		OR	x:20€	·
		T CLAIM PRESEN		7 CFR 1.16(d))		+.180		OR	+.360	
		olumn 1 is less tha		er "0" in column 2		TOTAL		OR	TOTAL	
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77	15105	Alivis As Alvic (Column 1)	ENDED.	(Column 2)	(Column 3)	SMALL (ENTITY	OR	OTHER SMALL	
Į.		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- 11ONAL FEE
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┝╌	THO THE SECTION					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
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8 5		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
E E	Total (37 CFR 1.16(c))	AMENDMENT	Minus	**	=	x, <u>25</u> _		OR	× 50	
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ST		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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	tt If the "Highest	column 1 is less the Number Previousl Number Previousl	v Paid For	" IN THIS SPACE	: Is less than 20	, emer zo .	•	_		

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	PATENT	APPLICATION Effection	ON FEE Date	DETERM ber 1, 20	TANII EÖ	ION RECO	ORD		10		26	392
-		CLAIMS A	S FILED	- PART	1		SMA	LL E	NTITY	, ,		THAN
_			(Colum	in 1)	(Col	umn 2)	TYP			OR	SMALL	
	TOTAL CLAIM	S	<u>. </u>				· R/	TE	FEE	1	RATE	FEE
1	OR		NUIMBER	RFILED	HUM	BER EXTRA	BAS	C FEE	385.00	OR	BASIC FEE	770.00
	TOTAL CHARGE	ABLE CLAIMS	m	inus 20=			xs	9=		OR	X\$18=	•
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~	IULTIPLE DEPE	NDENT CLAIM P	PRESENT				+11	15=		OR	+290=	
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业	(CLAIMS AS A	AMENDE	D - PAŘí (Colum		(Column 3)	SM.	ALL (ENTITY	OR	OTHER SMALL	
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لــا	FIRST PRESE	NTATION OF MU	LIPLE DEP	ENUENI	AIM		+145	_	:	OR	+290÷	
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					10	17	<u> 243</u>	<u> </u>					
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T	OTAL CLAIM	S						RATE	T	FEE	7	RATE	F
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MENDMENT C AMENDMENT B	Total Total Total Total	(Column 1) CLAIMS REMAINING AFTER AMENDMENT TOTALION OF MU (Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus Minus LTIPLE DEP	(Column Highle NUME PREVIO PAID F	CLAIM	(Column 3) PRESENT EXTRA = (Column 3) PRESENT EXTRA		+145= TOTA ADDIT FEE RATE XS 9= X43= +145= TOTAL ADDIT FEE	T	ADDI- IONAL FEE	OR OR OR OR	+290= TOTAL ADDIT. FEE RATE X\$18= X882 +290= TOTAL ADDIT. FEE RATE X\$18=	TIO FI

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10726392

		CLAIMS AS	FILED - (Column	(Colui	nn 2)		SMALL EN	TITY	OR	OTHER SMALL		
TC	TAL CLAIMS		27					RATE	FEE		RATE	FEE
FO	R		NUMBER	FILED	NUMBI	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	₩ min	us 20=	· G			X\$ 9=		OR	X\$18=	144
IND	EPENDENT CL	AIMS	4 mi	nus 3 =	*)			X43=		OR	X86=	96
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=	
+ If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2	1	TOTAL		OR	TOTAL	1000
	С	LAIMS AS A (Column 1)	MENDED	- PAR' (Colur		(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	2
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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ENT C		CLAIMS REMAINING AFTER AMENDMENT	,	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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		mn 1 is less than to mber Previously Pi					, -	TOTAL	•	OR	TOTAL	
-	lf the "Highest Nu	mber Previously Pa mber Previously Pa mber Previously Pa	aid For IN TH	IS SPACE	is less tha	n 3. enter "3."		ADDIT. FEE	propriate bo	9.	ADDIT. FEE olumn 1.	

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE [OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR NUMBER FILED NUMBER EXTRA BASIC FEE 385.00 BASIC FEE 770.00 OR TOTAL CHARGEABLE CLAIMS minus 20= XS 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X43= X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL 200 **CLAIMS AS AMENDED - PART II** OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE **AMENDMENT** PREVIOUSLY AFTER **EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus X\$ 9= X\$18= OR Independent Minus ·X43= X86≈ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-Ø REMAINING NUMBER PRESENT ENT RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY** EXTRA **AMENDMENT** PAID FOR FEE FEE Minus Total X\$ 9= X\$18= OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL ENDMENT TIONAL AFTER RATE RATE PREVIOUSLY **EXTRA** AMENDMENT PAID FOR FEE FEE Total · Minus ** XS 9= X\$18= OR Minus Independent X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= +290= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE ADDIT, FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number